# ISUZOIITIST

Office

Use

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

15 MAR 16 PM 3: 40

**FEC FORM 3** 

					Oil	ice use only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT		Example: If typing, over the lines.	type 1	L2FE4M5		
, JASON YATES FOR	US CONGRE	99					
J. J			1	1_1_1_1	1 1 1 1		111
1							-
		1111				<del>                                     </del>	
	901 BRUTSCH	R ST SUITE D P	MB #166				
ADDRESS (number and street)					11   1	1111	
•	1			1 1 1 1	1111		1
Check if different than previously	ı NEWBERG			<del> </del>	00 . 074	- <del></del>	<u></u>
reported. (ACC)	NEWBERG				OR 971:	32 	1 1 1
2. FEC IDENTIFICATION N	UMBER ▼	· CITY		STA	ATE A	ZIP CODE	<b>A</b>
- -						STATE ▼	DISTRICT
C C00556225		3. IS THIS	NEW NEW	X	AMENDED	, OR ,	, 01 ,
•		REPORT	(N)	OR ^	(A)		
				· · · · ·		1	
4. TYPE OF REPORT (CI	noose One)	/b) 40 b <b>an</b>	<b>.</b>				
(a) Quarterly Reports:		(b) 12-Day <b>PR</b>	E-Election Report	for the:			
(4) 444.45.7			Primary (12P)	×	General (12G)	Run	off (12R)
April 15 Quarterly	Report (Q1)		, iiiiay (12, )	•	denoral (120)	· · · · · · · · · · · · · · · · · · ·	ion (izili)
•			Convention (12	PC)	Special (12S)		
July 15 Quarterly I	Report (Q2)						
Ostabay 15 Overta	who Bornert (OC)		. 11 .	04	2014 Y	in the	OR
October 15 Quarte	eny Report (US)	Election or	) ''	U-4	2014	State of	Oit
January 31 Year-E	nd Report (YE)	(c) 30-Day <b>PO</b>	ST-Election Repor	rt for the	, , , , , , , , , , , , , , , , , , , ,		
		(o) 00-Day F •	or-Liection Nepol	it for tile.			
			General (30G)		Runoff (30R)	Spe	cial (30S)
Tampiastica Basel	· (TTC)						
Termination Report	((EH)	Floatian	M <sup></sup> M	/ Y		in the	
		Election or	ř			State of	
				-			
5. Covering Period 1	0 01 /	2014	<b>Ab</b> usaala	M ' M /	D D / Y	Y Y	
5. Covering Period 1	0 01	2014	through	10	15	2014	
				· · · · · · · · · · · · · · · · · · ·			
I certify that I have examined the	his Report and to t	he best of my k	nowledge and be	lief it is true,	correct and co	mplete.	
Type or Print Name of Treasure	r WILLIAM JASO	N YATES					
	<del></del>				· · · · · · ·		
Oleman of Torrest and Water	1111111000000000				м м 03	12	2015
Signature of Treasurer WILL	LIAM JASON YATES			Date			. <del>.</del>
NOTE: Submission of false, erron	aque or incomplete	information may	cubingt the name	n cianina thia	Donart to the -	analting of 0.110	O 6407-

#### FEC Form 3 (Revised 02/2003)

### **SUMMARY PAGE**

of Receipts and Disbursements

PAGE 2 / 12

Write or Type Committee Name

### JASON YATES FOR US CONGRESS

Report	Covering	the	Period:
--------	----------	-----	---------

From:

M M / D D

2014

To:

м м 10

15

2014

				COLUMN A This Period			COLUMN B Election Cycle-to-Date		
6.	Net (	Contributions (other than loans)							
		Total Contributions (other than loans) (from Line 11(e))	· <del>3</del> ·	<b>'y</b> -	2739.14	· <b>3</b> '	· <b>7</b> ·	410.14	
		Total Contribution Refunds from Line 20(d))	<b>y</b> -	.,	0.00	<b>3</b> .	. 1.	0.00	
		Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	7.	<b>∤ÿ</b> .	2739.14	7	<b>T.</b>	410.14	
7.	Net C	Operating Expenditures							
		Fotal Operating Expenditures from Line 17)	<b>T</b> .	<b>19</b> %	415.05	<b>y</b> \	9.	1421.63	
		Fotal Offsets to Operating Expenditures (from Line 14)	# <b>%</b> -	un 15° au	0.00	٠ واس	· <b>9</b> ·	0.00	
		Net Operating Expenditures subtract Line 7(b) from Line 7(a))	15	<b>7</b> ^	415.05	y.	·7	1421.63	
8.		on Hand at Close of rting Period (from Line 27)	<b>∕</b> ∌•	^ <b>J</b> '	1787.24				
9.	the C	s and Obligations Owed <b>TO</b> committee (Itemize all on dule C and/or Schedule D)	<b>ታ</b> ~	· <b>3</b> · ·	0.00				
10.	the C	s and Obligations Owed <b>BY</b> committee (Itemize all on dule C and/or Schedule D)	<b>7</b> ·	- ^ <b>3</b> ^	4833.75				

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

PAGE 3 / 12

FEC Form 3 (Revised 12/2003)
Write or Type Committee Name

JASON YATES FOR US CONGRESS

\_\_\_\_\_

Report Covering the Period: From: 10 01 2014 To: 10 15 2014

	I. RECEIPTS		COLUMN A Total This Period			COLUMN B Election Cycle-to-Date		
1. C	CONTRIBUTIONS (other than loans) FROM:							
(a	•							
	Political Committees			1165.00	· <del></del> , <del></del>		0.00	
	(i) Itemized (use Schedule A)	少	Ť	•	95	4	Ø.00	
	(ii) Uniternized			1574.14			410.14	
	(iii) TOTAL of contributions	<b>♂</b>	. 7		75.	<b>-7</b> '		
	from individuals .	_		2739.14			410.14	
		_7 -	- <b>T</b>		7	7	<b>.</b> .	
(b	o) Political Party Committees	<b>.</b>	<b>- ■</b> F	0.00		.=.	0.00	
(0	c) Other Political Committees	.# *	* <b>7</b> *	, , -	• <b>5</b>	<b>'7</b> '		
	(such as PACs)	ý	•	0.00	. 3	<del>y</del>	0.00	
		5.	٠				·	
(d	•	<del>5</del>	<b>'5</b>	0.00	9,	· <b>J</b> ·	<u>0</u> .00	
(е	•							
	(other than loans)			2739.14			440.44	
	(add Lines 11(a)(iii), (b), (c), and (d))	•9•	·5·	2755.14	7	. <b>T</b> .	410.14	
. TI	RANSFERS FROM OTHER			u .			_	
	UTHORIZED COMMITTEES	_	_	0.00			0.00	
		. 32	· <b>5</b>	••	*	<b>'</b>	250	
3. L(	OANS:							
(a	•							
	Candidate	·9·	• •	0.00	· <b>y</b> ·	**	0.00	
		-		Ö.00		•	0.00	
(b	•	√ <b>5</b> °	<b>'3</b> '	r <b>i</b> ns	· <b>9</b> ·	· <b>J</b> ·	Ø.00 /■\ "	
(C	•	•	•-	0.00		11.00	0.00	
	(add Lines 13(a) and (b))	T	Ŧ	•	7	Ŧ	7.	
i. O	FFSETS TO OPERATING							
	XPENDITURES							
(A	Refunds, Rebates, etc.)	· <b>y</b> ·	7	<b>0</b> .00	<b>T</b>	<b>y</b>	0.00	
		•	•		,		•	
	THER RECEIPTS			0.00				
(D	Dividends, Interest, etc.)	•	-55	0.00	Ŧ	7.	0.00	
T	OTAL RECEIPTS (add Lines							
11	1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)			2739.14			410.14	
10	miny rotal to Ellio 27, page 4/	֏.	₹.	** , <b>**</b> **	75	<b>'7</b> '		

15020117159

### **DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Disbursements

PAGE 4 / 12

******	II. DISBURSEMENTS		COLUMN A Total This Period			COLUMN B Election Cycle-to-Date		
17.	OPERATING EXPENDITURES	. (	/ <b>7</b> '	415.05	<b>9</b>	· <b>ÿ</b> ·	1421.63	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<b>::</b> :	<b>3</b> `	0.00	7	Ţ	0.00	
19.	LOAN REPAYMENTS:  (a) Of Loans Made or Guaranteed by the Candidate	.7	ωgs .	0.00	<b>4</b> °	- 195	0.00	
	(b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	<b>T</b>	9° ''	0.00	7	<i>3</i> :	0.00	
20.	REFUNDS OF CONTRIBUTIONS TO:  (a) Individuals/Persons Other Than Political Committees	Ŧ	<b>9</b> °.	0.00	<b>.9</b> -	<b>4</b> °,	0.00	
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li><li>(such as PACs)</li></ul>	<b>3</b> *	ক - ক	0.00	<b>1</b>	\$. T	0.00	
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	3.		0.00	7	•	0.00	
21.	OTHER DISBURSEMENTS	<b>*</b>	<b>ታ</b> .	0.00	7	· <b>/5</b> °	0.00	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	7	19	415.05	Ť	<b>4</b> 5-	1421.63	
	III. CASH SI	JMMARY					<u>-</u>	
3.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD			<b>4</b> ,	7	-536.85	
4	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)			· <b>7</b> ·	· <b>y</b> ·	2739.14	
5.	SUBTOTAL (add Line 23 and Line 24)				7	7	2202.29	
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)			7	Ť	415.05	
7.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	g period			<b>3</b> -	Ŧ	1787.24	

# SUZUII716

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

F	OR	LINE	NUMBER:	PAGE	:	5	OF	12
•		ck only	one)					
	X	11a	11b	11c		110	d	
		12	13a	13b		14	[	15

Any information copied from such Reports or for commercial purposes, other than using	and Statements may not be sold or used by any ing the name and address of any political committee	person for the purpose of soliciting contributions
<u> </u>	ing the name and address of any postical committee	to solicit contributions from such confinitee.
NAME OF COMMITTEE (IN FUII)  JASON YATES FOR US CO	ONGRESS	
Full Name (Last, First, Middle Initial)		
A. James Densmore		Date of Receipt
Mailing Address 433 SW West Hills Drive	•	м м / р г / у у у у у 10 14 2014
City	State Zip Code	Transaction ID : SA11AI.4791
McMinnville	OR 97128	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
N/A	N/A	Campaign Contribution
Receipt For: 2014	Election Cycle-to-Date	7
Primary General	267.00	
Other (specify)	207.00	
Full Name (Last, First, Middle Initial)		
B. Norman & Judy Kujala		Date of Receipt
Mailing Address 225 SE Galena Avenue		M M / D D / Y Y Y Y Y 10 10 09 2014
City	State Zip Code	Transaction ID : SA11AI.4801
Warrenton	OR 97146	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	60.00
N/A	N/A	Campaign Contribution
Receipt For: 2014	Election Cycle-to-Date	7
Primary General	000.00	
Other (specify)	260.00	
Full Name (Last, First, Middle Initial) Robert & Konnie Speirs		Date of Receipt
C. Mailing Address 1625 7th Street		-
1025 701 Street		'м м' / ' о с / Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4691
Columbia City	OR 97018	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	250.00
N/A	N/A	Campaign Contribution
Receipt For: 2014	Election Cycle-to-Date	7
Primary General	600.00	
Other (specify)	600.00	
SUBTOTAL of Receipts This Page (options	ત્રો)	410.00

TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 6 OF

OUTEDOLE A (LEO LOTTILO)	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS	X 11a 11b 11c 11d	
	12 13a 13b 14 15	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used by any per and address of any political committee	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) JASON YATES FOR US CONGRES	SS	
Full Name (Last, First, Middle Initial)  WILLIAM JASON YATES  Malling Address 901 BRUTSCHER ST SUITE D PMI	2,4400	Date of Receipt
		10 09 2014
	ate Zip Code R 97132	Transaction ID : SA11Al.4876
FEC ID number of contributing federal political committee.	H4OR01113	Amount of Each Receipt this Period
	upation ciate	Campaign Contribution
Receipt For: 2014 Elec Primary Seneral Other (specify)	tion Cycle-to-Date 355.00	
Full Name (Last, First, Middle Initial)  WILLIAM JASON YATES		Date of Receipt
Mailing Address 901 BRUTSCHER ST SUITE D PME City Str		M M 3 D / Y Y Y Y 10 13 2014
NEWBERG O	— y	Transaction ID : SA11AI.4689
FEC ID number of contributing federal political committee.	H4OR01113	Amount of Each Receipt this Period
Name of Employer Occi Bug Busters Asso	ipation clate	390.00 Campaign Contribution
Receipt For: 2014 Elec Primary General Other (specify)	tion Cycle-to-Date 745.00	
Full Name (Last, First, Middle Initial) WILLIAM JASON YATES		Date of Receipt
Mailing Address 901 BRUTSCHER ST SUITE D PMI	3 #166	M M D Y Y Y 10 13 2014
City Sta NEWBERG O	ate Zip Code R 97132	Transaction ID : SA11AI.4690
FEC ID number of contributing federal political committee.	H4OR01113	Amount of Each Receipt this Period
Name of Employer Occu Bug Busters Asso	pation ciate	10.00 Campaign Contribution
	tion Cycle-to-Date	
Primary Seneral Other (specify)	755.00	
SUBTOTAL of Receipts This Page (optional)		755.00
TOTAL This Period (last page this line number only)		1165.00

# i) D M

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER Use separate schedule(s) (check for each category of the Detailed Summary Page

INE	MOMBE	M;	FAGE		Ur	. 12
ont	y one)					
X	17	18		19a		191
	20a	20b		20c		121

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

JASON YAT	ES F	OR US	CONGR	RESS
-----------	------	-------	-------	------

/ JASON YATES FOR US CONGRESS		
Full Name (Last, First, Middle Initial)  Golden Valley Brewery		Date of Disbursement
Mailing Address 1520 NW Bethany Blvd.		10 13 2014
City State Zip Code Beaverton OR 97006		Amount of Each Disbursement this Period
Purpose of Disbursement		250.00
Fundraiser Room Fee	003	Transaction ID : SB17.4651
JASON YATES FOR US CONGRESS	Category/ Type	
Office Sought:    House   Disbursement For: 2014     Senate   Primary   General     Other (specify)     State: OR District: 01		
Full Name (Last, First, Middle Initial)		
Prime One Advocates		Date of Disbursement
Mailing Address 7100 SW Hampton Street		M M / D D / Y Y Y 10 13 2014
City State Zip Code		Amount of Fook Dishumanant this Date
Metzger OR 97223		Amount of Each Disbursement this Period
Purpose of Disbursement In-kind - Campaign Management Fees	·*	100.00
Candidate Name	Category/	Transaction ID : SB17.4879
Office Sought:  House Disbursement For: 2014 Senate Primary Other (specify)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
State: District:		
Full Name (Last, First, Middle Initial)		
		Date of Disbursement
Mailing Address		м м / о о / у ү ү ү ү . ү
City State Zip Code	· · · · · · · · · · · · · · · · · · ·	Amount of Each Disbursement this Period
Purpose of Disbursement		
		ن و
Candidate Name	Category/ Type	
Office Sought:		
SUBTOTAL of Disbursements This Page (optional)		350.00
OTAL This Period (last page this line number only)		350.00

## SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 8

X	13a

OF

12

SON YATES FOR US CONG							
LOAN SOURCE Full Name (Last, First, WILLIAM JASON YATES	Middle Initial)				ction: 2014 Primary General		<del></del>
Mailing Address 901 BRUTSCHER ST SUITE D PMB #166					Other (specif	fy) <b>▼</b>	
City	State	ZIP Code					
NEWBERG	OR	97132					
Original Amount of Loan	Cumulative F	Payment To Date		Balance C	Outstanding a	t Close of T	his Pe
2500.00	<u></u>	t. dr.	0.00	•	<b>4</b>	2500	
ERMS Date Incurred		Date Due	Interest	Rate		Secured	
M01 <sup>M</sup> / D29 <sup>D</sup> Y 2014	M ~ M /	<sup>/</sup> 11/5/20		0.00	% (apr)	Yes	$\boxtimes$
ist All Endorsers or Guarantors (if an	y) to Loan Sourc	:8				163	
. Full Name (Last, First, Middle Initial)		Name	e of Employer		-		
Mailing Address		Осси	pation	<u>, , , , , , , , , , , , , , , , , , , </u>			
City State	e ZiP Code		unt anteed tanding:	Ŧ	<b>'</b>		
Full Name (Last, First, Middle Initial)	<del></del>		e of Employer	. <u></u>	<del> </del>		
Mailing Address	***************************************	Occu	pation		7.00	· · · · · · · · · · · · · · · · · · ·	
		Amoi			***		
City State	ZIP Code		anteed anding:	- <b>X</b>	/ <b>g</b> '		
Full Name (Last, First, Middle Initial)		Name	e of Employer			<u> </u>	·
Mailing Address		Occu	pation				
		Amou				-	
City State	ziP Code		anteed anding:	<b>3</b> ;	<b>'3</b> '		
Full Name (Last, First, Middle Initial)		Name	of Employer				
Mailing Address		Occu	pation				
City State	ZIP Code		int anteed anding:	3.	<b>3</b>		
FOTALS This Period This Page (options	an.	<u> </u>		<u>, , , , , , , , , , , , , , , , , , , </u>		őras	
TOTALO TINO TOTO TINO TUSO (OPILOTI	21 <i>j</i>				<b>3</b>	2500	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

# SUZUII/IES

## SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

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<u> </u>	13a
$\neg$	

OF

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	Deta	liled Summary Page			13b
NAME OF COMMITTEE (In Full)		Transaction	on ID : SC/10.4175		<u> </u>
JASON YATES FOR US CONGRESS					
LOAN SOURCE Full Name (Last, First, Middle Initial)		1	Election: 2014		
WILLIAM JASON YATES			Primary		
Mailing Address			General Other (specify)		
901 BRUTSCHER ST SUITE D PMB #166		į	Other (specify)	•	
City State	ZIP Code				
NEWBERG OR	97132				
Original Amount of Loan Cumulative	Payment To Date	Balanc	e Outstanding at (	Close of This	Period
587.90		0.00		587.9	90
<b>3</b>	7	<b>,™</b>	9 _ 9	•	
TERMS Date Incurred	Date Due	Interest Rate		Secured:	
M <sub>01</sub> M / D <sub>31</sub> D / 2014 M M / D	D / Y11/5/2014	y 0.00 <sup>-</sup>		i (-1	<b>⋈</b>
	e e e e e e e e e e e e e e e e e e e	. इ.	% (apr)	Yes	No_
List All Endorsers or Guarantors (if any) to Loan Sour		· · · · · · · · · · · · · · · · · · ·			
1. Full Name (Last, First, Middle Initial)	Name o	f Employer			
Mailing Address	Occupa	tion			
	Amount				
City State ZIP Code			•		
	Outstan	ding:	<b>1</b>		
2. Full Name (Last, First, Middle Initial)	Name o	f Employer			
Mailing Address	Occupat	ion			<del></del>
	Amount	····			
City State ZIP Code	Guarant	eed			
	Outstand		` <b>^3</b> `		
3. Full Name (Last, First, Middle Initial)	Name of	f Employer			
Mailing Address	Occupat	ion			
	Amount	•			
City State ZIP Code	Guarante Outstand		· / <b>j</b>		
4. Full Name (Last, First, Middle Initial)		f Employer			
	Name of	Linployer			
Mailing Address	Occupat	ion			
	Amount	<del></del>			
City State ZIP Code	Guarante Outstand		<b>J</b> .		
SUBTOTALS This Period This Page (optional)				587.90	_
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		or or	*** _	
TOTALS This Period (last page in this line only)					

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

TOTALS This Period (last page in this line only) ..

### SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 10 OF

र	13a
_	

12

	Detailed Summar	y Page	(check only	one)	13a 13b
RESS	Tra	ansaction I	ID : SC/10.417	6	1 100
/liddle Initial)			Primary	<del></del>	<del></del>
			į	y) <b>▼</b>	
State ZIP Cod	de				
OR 97132					
Cumulative Payment To	Date	Balance (	Outstanding at	Close of T	his Peric
· · · · · · · · · · · · · · · · · · ·	0.00	,	•	135	5.09
Date Due	Interest	Rate		Secured	l:
мм/ р / ч		0.00	% (apr)		$\boxtimes$
to Loan Source			<del>•</del>		1.13
	Name of Employer	<del></del>			
	Occupation				
ZIP Code	Amount Guaranteed Outstanding:	· <b>T</b>	<b>4</b>		
	Name of Employer			<del> </del>	
	Occupation				
ZIP Code	Amount Guaranteed Outstanding:	T.	- ' <b>3</b> '' .		
	Name of Employer				
	Occupation				
ZIP Code	Amount Guaranteed Outstanding	9.	49:		
	Name of Employer		-		<del></del>
	Occupation				
					<del></del> -
	Cumulative Payment To  Date Due  M M / D D / Y1.  to Loan Source  ZIP Code	RESS  Middle Initial)  State ZIP Code OR 97132  Cumulative Payment To Date  Date Due Interest  M M / D D / Y11/5/2014 Y  To Loan Source  Name of Employer  Occupation  Amount Guaranteed Outstanding: Name of Employer  Occupation  Amount Amount Guaranteed Outstanding: Name of Employer	State ZIP Code OR 97132  Cumulative Payment To Date Balance Community Payment To Date Balance Community Payment To Date Balance Community Payment To Date Due Interest Rate  M M / D D / Y11/5/2014 Y 0.00  To Loan Source  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Varie of Employer  Occupation  Amount Guaranteed Outstanding:  ZIP Code  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Name of Employer	Transaction ID : SC/10.417  RESS  Middle Initial)  Election: 2014 Primary General Other (specify  State ZIP Code OR 97132  Cumulative Payment To Date Balance Outstanding at  0.00  2 3 0.00  2 3 0.00  2 3 0.00  2 3 0.00  Annount Guaranteed Outstanding: 3 3  Name of Employer  Occupation  Arnount Guaranteed Outstanding: 3 3  Name of Employer  Occupation  Arnount Guaranteed Outstanding: 3 3  Name of Employer  Occupation  Annount Guaranteed Outstanding: 3 3  Name of Employer  Occupation  Annount Guaranteed Outstanding: 3 3  Name of Employer	Transaction ID : SC/10.4176  RESS  Middle Initial)  Election: 2014  Primary General Other (specify) ▼  State ZIP Code OR 97132  Cumulative Payment To Date Balance Outstanding at Close of T  Date Due Interest Rate Secured  M M / O D / Y11/5/2014 Y 0.00  Mame of Employer  Occupation  Amount Guaranteed Outstanding: 3: 3:  Variety Code  Name of Employer  Occupation  Amount Guaranteed Outstanding: 3: 3:  Name of Employer  Occupation  Amount Guaranteed Outstanding: 3: 3:  Name of Employer  Occupation  Amount Guaranteed Outstanding: 3: 3:  Name of Employer  Occupation  Amount Guaranteed Outstanding: 3: 3:  Name of Employer  Occupation  Amount Guaranteed Outstanding: 3: 3:  Name of Employer

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

## SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 11 OF FOR LINE NUMBER:

FOR LINE NUMBER (check only one)

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12

ME OF COMMITTEE (In Full)		Tra	nsaction ID : SC/10.4170	8
ASON YATES FOR US CON				
LOAN SOURCE Full Name (Last, Firs	t, Middle Initial)		Election: 2014	-
WILLIAM JASON YATES			Primary General	
Mailing Address 901 BRUTSCHER ST SUITE D PMB #166	3		Other (specify	v) <b>▼</b>
City	State ZI	P Code		
NEWBERG	OR 9	7132	·····	
Original Amount of Loan	Cumulative Payme		Balance Outstanding at	Close of This Period
1535.00		0.00	. 9	1535.00
TERMS Date Incurred	Date	Our Internet	Data	
MO3 <sup>M</sup> / D13 P Y 2014 Y		<sup>Y</sup> 11/5/2014 <sup>Y</sup>	0.00 % (apr)	Secured:
List All Endorsers or Guarantors (if a	***			Yes No
1. Full Name (Last, First, Middle Initial	)	Name of Employer		
Mailing Address		Occupation		
		Amount		
City Sta	te ZIP Code	Guaranteed Outstanding:	'n 'n	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
	· · · · · · · · · · · · · · · · · · ·	Amount		·
City Sta	te ZIP Code	Guaranteed Outstanding:	<b>3</b> ~ ( <b>3</b> )	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount	-	
City Sta	te ZIP Code	Guaranteed Outstanding:	T. Or	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City Star	te ZIP Code	Guaranteed Outstanding:	T T	
BTOTALS This Period This Page (optio	лаі) ————————	<b>&gt;</b>	OF OF	1535.00
TALS This Period (last page in this line	only)	<b>.</b>	<b>3</b> 2	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

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## SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 12

X	13a	

12

OF

			Detailed Suffil	nary Fage			13b
NAME OF COMMITTEE (In F				Transaction	ID : SC/10.4177	,	
JASON YATES FOR							
LOAN SOURCE Full Nar	ne (Last, First, M	iddle Initial)		Ele	ction: 2014		
WILLIAM JASON Y	'ATES			X	Primary		
Mailing Address					General		
901 BRUTSCHER ST SUIT	E D PMB #166				Other (specify)	<b>▼</b>	
City		State ZI	P Code				
NEWBERG		OR 9	7132				
Original Amount of Loan		Cumulative Payme	nt To Date	Balance (	Outstanding at	Close of Thi	is Perior
	75.76	,	0.00				
-3: .3	***		g And A		7, 9	75.	
TERMS Date Incum	ed	Date	Due Inter	est Rate		Secured:	
M03 <sup>M</sup> / D31 <sup>D</sup> /	ž014 <sup>v</sup>	M M / 0 / /	<sup>Y</sup> 11/5/2014 <sup>Y</sup>	0.00		[]	57
				12.14	% (apr)	Yes	No
List All Endorsers or Gua	,	to Loan Source					
1. Full Name (Last, First,	Middle Initial)		Name of Employe	r			
Mailing Address		,	Occupation				
City	C4-4-	710.0.1	Amount Guaranteed				
City	State	ZIP Code	Outstanding:	Ŧ	<b>'ÿ</b> '		
2. Full Name (Last, First, I	viiddle Initial)		Name of Employe	r		<del></del>	<del></del>
Mailing Address			Occupation				
			Ообаранон				
City			Amount Guaranteed			<u> </u>	
City	State	ZIP Code	Outstanding:	<b>T</b> .	75		
3. Full Name (Last, First, I	/liddle Initial)		Name of Employer	•			<u></u>
Mailing Address			Occupation	<del></del>	<u></u>		<del></del>
			Codepation				
0.0			Amount				-
City	State	ZIP Code	Guaranteed Outstanding:	1.97	g.		
4. Full Name (Last, First, M	/liddle Initial)		Name of Employer				
Mailing Address			Occupation				
			Оссарацоп				
City	<u> </u>	710.0	Amount				
City	State	ZIP Code	Guaranteed Outstanding:	Ţ	ĵ		
		<del></del>			<del></del>		
UBTOTALS This Period This	rage (optional)		<b>•</b>		r r	75.7	<b>′</b> 6
OTALS This Period (last page	e in this line only	۸				4000 7	·

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of the relationships and the second second



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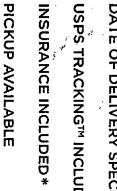
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03/05/15

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NEWBERG OR 97132-6096

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> OFFICE OF PUBLIC RECORDS PO BOX 77578 WASHINGTON DC 20013-8578

> > **USPS TRACKING #**



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